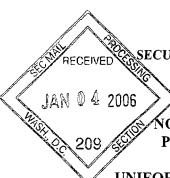
FERM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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	C	)MB	APP	ROV	ΆL	(	
OM		JMBE			235-	0076	
Expi	res:		-	Apri	130, 3	2008	
Estimated average burden							
hou	rs p	er re	spor	ise.	1	6.00	

SEC USE ONLY					
Prefix	Serial				
DATE	RECEIVED				

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)							
Swergold Capital Partners, L.P Offering of Limited Partnership Interests							
Filing Under (Check box(es) that app	oly):   Rule 504	☐ Rule 505	⊠ Rule 5	06 □ Secti	on 4(6) ULOE		
Type of Filing: ☐ New Filin	g 🗵 Amendment						
	A. BASIC I	DENTIFICATIO	ON DATA	·	i kaann aanna anni aanna waan maal anna akkii ann 1844		
1. Enter the information requested a	bout the issuer						
Name of Issuer (☐ check if this is	an amendment and name l	has changed, and i	ndicate chan	ge.)			
Swergold Capital Partners, L.P.					06021565		
Address of Executive Offices	(Number and Stree			Telephone N	00021303		
c/o Swergold Capital Management	, L.P., 575 Lexington Av	enue, Suite 400, I	New York,	(212) 605-4950	0		
NY 10022						_	
Address of Principal Business Opera	tions (Number and Stree	et, City, State, Zip	Code)	Telephone Nur	mber (Including Area Code)		
(if different from Executive Offices)	Same as above.				- ARCSIFIU	_	
Brief Description of Business: Inve	stments in Securities				PROGRA	_	
Type of Business Organization					ify): 2 JAN 2 3 2005		
☐ corporation	☑ limited partnership, al	•	□ oti	her (please speci	ify): 12 JAN 6 3 600		
☐ business trust	☐ limited partnership, to				MORREDA	_	
	1	Month Ye	ar		FINANCIAL		
Actual or Estimated Date of Incorpora	tion or Organization:	0 1 0	<u>5</u> 5	Actual DE	stimated		
Jurisdiction of Incorporation or Organ		U.S. Postal Service	e abbreviatio	n for State:	DE		
•	r Canada; FN for other for				<u> </u>		

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid **0MB** control number.

## A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following:

1

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing general partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

J		•			
Check Box(es)that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, Swergold Advisers, L.L.C.					
Business or Residence Addr c/o Swergold Capital Man	•	• • • • • •	•	10022	
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, Swergold, Mitchell	if individual)				
Business or Residence Addr c/o Swergold Capital Man	*		•	10022	
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partners
Full Name (Last name first, Berman, Seth I.	if individual)	444.1.444			
Business or Residence Addr c/o Swergold Capital Man	•		,	10022	
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)			-	
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)	Apprology - A - 100		,	
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		9,910
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
	(Lise blank sheet or	conv and use additional	conies of this sheet as	necessary)	

				B. IN	<b>IFORMAT</b>	TON ABO	UT OFFE	RING				
1. Has th	e issuer sol	d, or does	the issuer in	ntend to sel	l, to non-ac	credited in	vestors in t	his offering	ς?		Yes 🗖	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
	2. What is the minimum investment that will be accepted from any individual?\$1,000,000*											
Sui	* Subject to the discretion of the General Partner to accept lesser amounts.  Yes No											
3. Does t	he offering	permit join	nt ownershi	p of a sing	le unit?	'11.1		. 11		.1	X	<u> </u>
remunera person of	tion for sol a broker or	icitation of r dealer reg	ted for each f purchasers gistered with ted person o	in connect the SEC	tion with sa and/or with	iles of secu a state or s	rities in the tates, list th	offering. ne name of	If a person the broker	to be listed or dealer.	is an assoc If more that	riated n five (5)
Full Nam	e (Last nan	ne first, if i	ndividual)									
Business	or Residen	ce Address	(Number	and Street	t, City, Stat	e, Zip Code	e)	·				
Name of	Associated	Broker or	Dealer									
			nas Solicite individual								D	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if in	ndividual)									
Business	or Residen	ce Address	(Number	and Street	, City, State	e, Zip Code	e)					
Name of	Associated	Broker or	Dealer									
			nas Solicite individual								🗖	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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Full Nam	e (Last nam	ne first, if in	ndividual)									
Business	or Residen	ce Address	(Number	and Street	, City, State	e, Zip Code	e)	·				
Name of	Associated	Broker or	Dealer			To the first control of the control						
			nas Solicite									All States
				,						[O 4 3		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]

1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offing price of securities included in this offering and the total amount

١,

	already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	offered for exchange and arready exchanged.	Aggrega	te		Amount
	Type of Security	Offering An			ready Sold
	Debt	\$		\$	
	Equity	\$		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$ 1,000,000	,000	•	635,000
	Other	\$		\$	
	Total	\$ 1,000,000	,000	\$ 4,	635,000
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".				
	Accredited Investors	Number Investor 15		Dol of	ggregate lar Amount Purchases 635,000
	Non-accredited Investors.	-0-		\$	-0-
	Total (for filings under Rule 504 only)	N/A		\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
		Type of		Dol	lar Amount
	Type of offering Rule 505	Security	r	\$ 0	Sold
	Regulation A	N/A N/A		\$0	
	Rule 504	N/A		\$0	
	Total	N/A		\$ 0	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	,		\$	
	Printing and Engraving Costs			\$	
	Legal Fees		_	\$	
	Accounting Fees		_	\$	
	Engineering Fees.			\$	
	Sales Commissions (specify finder's fees separately)			\$	
	Other Expenses (identify) Organizational and Offering Expenses			\$ 12	5,000
	Total		$\boxtimes$		5,000

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AN	D U	SE OF PROC	EEDS	
5.	b. Enter the difference between the aggregate of Question 1 and the total expenses furnished in difference is the "adjusted gross proceeds to the iss Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amount estimate and check the box to the left of the estim	response to Part C - Question 4.a. the uer"	nis  be an		\$	999,875,000
	equal the adjusted gross proceeds to the issuer set					
	above.					
				Payments To Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of m			\$		\$
	Construction or leasing of plant buildings and f			\$		\$
	Acquisition of other businesses (including the voffering that may be used in exchange for the assissuer pursuant to a merger)	ssets or securities of another		\$ \$	<u>.</u> 0	\$ <u>.</u> \$
	Working capital			\$	🗆	\$
	Other (specify): Investments in Securities		\$	<u>.</u> 🗵	\$ <u>999,875,000</u>	
			_		-	
	Column Totals			\$	<u>.</u> 🗵	\$ <u>999,875,000</u>
	Total Payments Listed (column totals added)			(X) \$	999,87	5,000
1		D. FEDERAL SIGNATURE	1			
		D. FEDERAL SIGNATURE		<u> </u>		
fo	ne issuer has duly caused this notice to be signed by llowing signature constitutes an undertaking by the aff, the information furnished by the issuer to any not	issuer to furnish to the U.S. Securities	Con	nmission, upo	n writtei	
<u>-</u>	ssuer (Print or Type)	Signature			Date	
	Swergold Capital Partners, L.P.				Decemb	per <u>/</u> , 2005
	Name of Signer (Print or Type)	Title of Signer (Print or Type)				
	By: Swergold Advisers, L.L.C., General Partner	The or organic (Trint or Type)				
J	By: Seth I. Berman	Principal				
_		<u> </u>				

ATTENTION \_\_\_\_\_\_ ATTENTION \_\_\_\_\_\_ Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)